



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Piltz	Karen	M.L.	528-8200
MAILING ADDRESS (Street)			FAX
745 Fort Street, 9 th Floor			536-5869
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Chun Kerr Dodd Beaman			528-8200
MAILING ADDRESS (Street)			FAX
745 Fort Street, 9 th Floor			536-5869
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

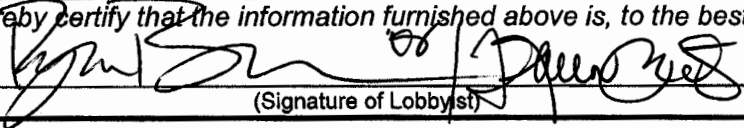
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Advantage Capital Partners		504-522-4850
MAILING ADDRESS (Street)		FAX
909 Poydras St., #2230		504-522-4950
(City)	(State)	(Zip Code)
New Orleans	LA	70112
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Emily Dewey		504-522-4850
MAILING ADDRESS (Street)		FAX
909 Poydras St., #2230		504-522-4950
(City)	(State)	(Zip Code)
New Orleans	LA	70112

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operations & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

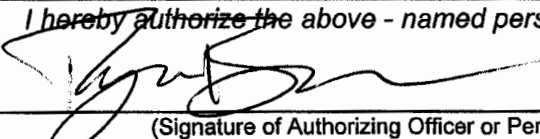
PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. *28*


(Signature of Lobbyist)

1/24/05 / 1/26/05
(Date)

PART V AUTHORIZATION TO LOBBY

NAME <i>Ryan Brennan</i>		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED <i>Vice President</i>	
NAME OF ORGANIZATION (if applicable) Advantage Capital Partners		TELEPHONE 314-725-0800	
MAILING ADDRESS (Street) 7733 Forsyth Blvd., Suite 1850		FAX 314-725-4265	
(City) St. Louis	(State) MO	(Zip Code) 63105	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
 (Signature of Authorizing Officer or Person Represented)		<i>1/24/05</i> (Date)	